

## BUSINESS ADJUSTMENT REQUEST TO THE UNCLAIMED PROPERTY REPORT

Business/Holder name as provided on report:

Year Reported: 19\_\_\_\_\_ 20\_\_\_\_\_

I am requesting reimbursement in the amount of \$\_\_\_\_\_ reported in the name(s) of \_\_\_\_\_ as remitted on the above report.

Reason for the request: \_\_\_\_\_

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### DOCUMENTATION REQUIRED (✓ one)

\_\_\_\_\_ IF THE PROPERTY OWNER HAS BEEN PAID BY YOUR BUSINESS, PROVIDE PROOF OF PAYMENT AND SIGN THIS FORM BELOW.

\_\_\_\_\_ IF YOU HAVE DETERMINED THAT THE OWNER'S ACCOUNT IS STILL ACTIVE AND THE OWNER NAME AND PROPERTY WAS REPORTED IN ERROR, SIGN THIS FORM BELOW.

*I am duly authorized by the reporting business/holder to make this request/claim and certify that the information provided herein is true and correct to the best of my knowledge.*

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

Business/Holder: \_\_\_\_\_

Tax ID#: \_\_\_\_\_

Name & Phone# of Primary Contact: \_\_\_\_\_



\_\_\_\_\_

Address: \_\_\_\_\_

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### NOTARY PUBLIC

\_\_\_\_\_  
NOTARY SIGNATURE

\_\_\_\_\_  
DATE

MY COMMISSION EXPIRES: \_\_\_\_\_